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09/348,618	07/06/1999 RULE	297	3636	LSN-5

APPLICANTS
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**** CONTINUING DATA *******
 This application is a CIP of 09/173,236 10/15/1998 PAT 6,182,583
 and claims benefit of 60/091,800 07/06/1998
 and claims benefit of 60/092,699 07/14/1998

**** FOREIGN APPLICATIONS *******

**** IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** ** SMALL ENTITY ****
 07/30/1999

Foreign Priority claimed 35 USC 119(a-d) conditions met Verified and Acknowledged	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No / Anthony D Barfield / Examiner's signature	<input type="checkbox"/> Met after Allowance Initials	STATE OR COUNTRY MT	SHEETS DRAWINGS 16	TOTAL CLAIMS 26	INDEPENDENT CLAIMS 2
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TITLE
 HEIGHT ADJUSTABLE FURNITURE COLUMNS INCLUDING ACTUATION MECHANISMS

FILING FEE RECEIVED 2747	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees
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